## Wisconsin Department of Revenue 2-D Barcode File Layout 2005 Form 1 w/Schedule H-EZ

			Picture		Acceptable	
Code Field	Form Line #	Description	Clause	Max size	Values	Notes
		***Header Information***				
1	Header	Version Number	PIC X	2	T1	Current FTA Standard Version
2		Developer code	PIC 9	4		Your Assigned FTA code
3	Header	Jurisdiction	PIC X	2	WI	State of Wisconsin
4		Form Type	PIC X	8	FORM1HEZ	Wisconsin Form 1 w/Sched H-EZ
5		Current year	PIC 9	2	05	2005
6		Software version	PIC 9	2	00	If revised, change to 01 & must be approved
		*** 2005 WI Form 1 page 1 w/Scl	nodulo H-E7	***		
7	99#	Your Social Security Number	PIC 9	9		1
8		Spouse's Social Security Number	PIC 9	9		
9		Your Legal Last Name	PIC X	16		
10		Legal First Name & Middle Initial	PIC X	11		
11		If a Joint Return, Spouses Legal Last Name	PIC X	16		
12		Spouse's Legal First Name and Middle Initial	PIC X	11		
13			PIC X	30		
		Home Address (number and street)				
14 15		City or Post Office State	PIC X	24		
			PIC X			E P. W. Const. Lond.
16		Zip Code	PIC 9	5		5 digit zip code only
17		Single check box	PIC 9	1	1or blank	
18		Married Filing Joint Return check box	PIC 9	1	2 or blank	
19		Married Filing Separate Return check box-Fill in SS# Above	PIC 9	1	3 or blank	
20		Head of Household check box	PIC 9	1	4 or blank	
21		Also, Check here if Married check box	PIC 9	1	1 or 3	1 if checked or 3 if blank
22		State Election Campaign Fund check box-You	PIC 9	1	1 or 3	1 if checked or 3 if blank
23		State Election Campaign Fund check box-Your Spouse	PIC 9	1	1 or 3	1 if checked or 3 if blank
24		City check box	PIC X	1	C or blank	
25		Village check box	PIC X	1	V or blank	
26		Town check box	PIC X	1	T or blank	
27		Fill in Name	PIC X	24		
28	Tax District		PIC X	12		
29		School District	PIC 9	4		
30		Federal Adjusted Gross Income	PIC 9	9		
31		W-2 Wages	PIC 9	9		Can't be a negative number
32		Capital Gain/Loss Addition	PIC 9	9		
33		Other Additions (fill in code number)	PIC 9	2		
34		Other Additions (fill in code number)	PIC 9	2		
35		Other Additions (fill in code number)	PIC 9	2		
36		Other Additions (fill in code number)	PIC 9	2		
37		Other Additions (fill in code number)	PIC 9	2		
38		Add the Amounts in the Right Column for Lines 1-4	PIC 9	9		
39		Capital Gain/Loss Subtraction	PIC 9	9		
40		Other Subtractions (fill in code number)	PIC 9	2		
41		Other Subtractions (fill in code number)	PIC 9	2		
42		Other Subtractions (fill in code number)	PIC 9	2		
43		Other Subtractions (fill in code number)	PIC 9	2		
44		Other Subtractions (fill in code number)	PIC 9	2		
45		Add Lines 6 through 11	PIC 9	9		
46	13	Subtract Line 12 from Line 5. This is Your Wisconsin Income	PIC 9	9		

9/9/05 1 vlf

## Wisconsin Department of Revenue 2-D Barcode File Layout 2005 Form 1 w/Schedule H-EZ

		*** 2005 WI Form 1 page 2 w/Sc		***		
ode Field	Form Line #	Description	Picture Clause	Max size	Acceptable Values	Notes
47		Standard Deduction. See Table	PIC 9	9	values	Can't be a negative number
48		If Someone Else Can Claim Youcheck box	PIC 9	1	1 or 3	1 if checked or 3 if blank
49		Subtract Line 15 From Line 14	PIC 9	9	1 01 0	The orecase of the blank
50		Deduction For Exemptions	PIC 9	5		Can't be a negative number
51		Fill in Number of Dependents	PIC 9	2		Carr be a negative named
52		If You Were Age 65 or Over check box	PIC 9	1	1 or 3	1 if checked or 3 if blank
53		If Your Spouse Was 65 or Over check box	PIC 9	1	1 or 3	1 if checked or 3 if blank
54		Subtract Line 17a From Line 16Taxable Income	PIC 9	9		
55		Tax	PIC 9	9		Can't be a negative number
56		Itemized Deduction Credit	PIC 9	7		Can't be a negative number
57	21	Armed Forces Member Credit	PIC 9	3		Can't be a negative number
58	22a	School Property Tax Credit-Rent Paid in 2005 Heat Inc.	PIC 9	7		Can't be a negative number
59	22a	School Property Tax Credit-Rent Paid in 2005 Heat Not Inc.	PIC 9	7		Can't be a negative number
60	22a	School Property Tax Credit from Renters Table	PIC 9	3		Can't be a negative number
61	22b	Property Taxes Paid on Home in 2005	PIC 9	7		Can't be a negative number
62	22b	Property Tax Credit from Table	PIC 9	3		Can't be a negative number
63	23	Working Families Tax Credit	PIC 9	5		Can't be a negative number
64	24	Add Lines 20 through 23	PIC 9	5		Can't be a negative number
65	25	Subtract Line 24 From Line 19	PIC 9	7		Can't be a negative number
66	26	Alternative Minimum Tax	PIC 9	7		Can't be a negative number
67	27	Add Lines 25 and 26	PIC 9	7		Can't be a negative number
68	28	Married Couple Credit	PIC 9	3		Can't be a negative number
69		Other Credits-Schedule MS	PIC 9	7		Can't be a negative number
70	29b	Other Credits-Schedule DI	PIC 9	7		Can't be a negative number
71	29c	Other Credits-Schedule VC (Part I)	PIC 9	7		Can't be a negative number
72		Other Credits-Schedule VC (Part II)	PIC 9	7		Can't be a negative number
73		Other Credits-Total	PIC 9	7		Can't be a negative number
74		Add Lines 28 and 29	PIC 9	7		Can't be a negative number
75		Subtract Line 30 From Line 27Net Tax	PIC 9	7		Can't be a negative number
76		Recycling Surcharge	PIC 9	7		Can't be a negative number
77		Sales and Use Tax	PIC 9	7		Can't be a negative number
78		Endangered Resources Donation	PIC 9	5		Can't be a negative number
79		Packers Football Stadium Donation	PIC 9	5		Can't be a negative number
80		Breast Cancer Research Donation	PIC 9	5		Can't be a negative number
81		Veterans Trust Fund Donation	PIC 9	5		Can't be a negative number
82		Penalties on IRA's	PIC 9	5		Can't be a negative number
83 84		Penalties on IRA's X .33=	PIC 9	5 7		Can't be a negative number
04	39	Add Lines 31 through 38	PIC 9	1		Can't be a negative number
		*** 2005 WI Form 1 page 3 w/Sc		***		
85		Wisconsin Tax Withheld	PIC 9	7		Can't be a negative number
86		2005 Estimated Tax Payments and Amt. Applied to 2004	PIC 9	7		Can't be a negative number
87		Earned Income Credit Qualifying Children	PIC 9	2		
88		Earned Income Credit-Federal Credit	PIC 9	5		Can't be a negative number
89		Earned Income Credit	PIC 9	5		Can't be a negative number
90		Farmland Preservation Credit	PIC 9	5		Can't be a negative number
91		Net Income Paid to Another State (State abbreviation)	PIC X	2		
92		Net Income Paid to Another State	PIC 9	7		Can't be a negative number
93		Homestead Credit	PIC 9	5		Can't be a negative number
94		Farmland Tax Relief Credit-Property Taxes on Farmland	PIC 9	7		Can't be a negative number
95		Farmland Tax Relief Credit-Prop. Taxes on Farmland x .20=	PIC 9	5		Can't be a negative number
96		Veterans and Surviving Spouses Property Tax Credit	PIC 9	5		Can't be a negative number
97		Add Lines 41 through 48	PIC 9	7		Can't be a negative number
98		Amount you Overpaid \$	PIC 9	7		Can't be a negative number
99		Amount you Overpaid cents	PIC 9	2		Can't be a negative number
100		Refunded to You \$	PIC 9	7		Can't be a negative number
101		Refunded to You conts	PIC 9	2		Can't be a negative number
102		Applied To Your 2006 Estimated Tax \$	PIC 9	7		Can't be a negative number
400	52	Applied To Your 2006 Estimated Tax cents	PIC 9	2		Can't be a negative number
103		Δ · · · - · · · · · · · · · · · ·				
104	53	Amount You Owe \$	PIC 9	7		Can't be a negative number
	53 53	Amount You Owe \$ Amount You Owe cents Underpayment Interest \$	PIC 9 PIC 9 PIC 9	7 2 7		Can't be a negative number  Can't be a negative number  Can't be a negative number

## Wisconsin Department of Revenue 2-D Barcode File Layout 2005 Form 1 w/Schedule H-EZ

ode Field	Form Line #	Description	Picture Clause	Max size	Acceptable Values	Notes
108		Sched 1-Itemized Deduction Credit-Medical & Dental Exp.	PIC 9	8	valaco	Can't be a negative number
109		Sched 1-Interest Paid From Line 14. Federal Schedule A	PIC 9	8		Can't be a negative number
110	3	Sched 1-Gifts to Charity From Line 18, Federal Schedule A	PIC 9	8		Can't be a negative number
111	4	Sched 1-Add Lines 1 through 3	PIC 9	8		Can't be a negative number
112	1a	Sched 2-Married Couple Cr-Taxable Wages-Yourself	PIC 9	8		
113	1b	Sched 2-Married Couple Cr-Taxable Wages-Spouse	PIC 9	8		
114	2a	Sched 2-Married Couple Cr-Net Profit or LossYourself	PIC 9	8		
115	2b	Sched 2-Married Couple Cr-Net Profit or LossSpouse	PIC 9	8		
116	4a	Sched 2-Married Couple Cr-Add Amounts From Fed 1040Yourself	PIC 9	8		
117	4b	Sched 2-Married Couple Cr-Add Amounts From Fed 1040Spouse	PIC 9	8		
		*** 2005 WI Form 1 w/Schedule HEZ-(Sched	lule H-EZ	page 1)***		
118	Amended	Amended Return-check box	PIC 9	1	1 or 3	1 if checked or 3 if blank
119	1a	Fill in age	PIC 9	3		
120	1b	If Your Spouse was age 65 or overcheck box	PIC 9	1	1 or 3	1 if checked or 3 if blank
121	6a	Non Taxable Household Income-Unemployment Compensation	PIC 9	5		Can't be a negative number
122	6b	Non Taxable Household Income-Social Security, Fed & State SSI	PIC 9	5		Can't be a negative number
123	7b	Number of Qualifying Dependents	PIC 9	2		
124	7c	Household Income-Subtract Line 7b from Line 7a	PIC 9	7		Can't be a negative number
125	8	Homeowners-Net 2005 Property Taxes on your Homestead	PIC 9	7		Can't be a negative number
126	9a	Rent Paid-Heat Included	PIC 9	7		Can't be a negative number
127	9b	Rent Paid-Heat Included x .20 =	PIC 9	7		Can't be a negative number
128	9c	Rent Paid-Heat Not Included	PIC 9	7		Can't be a negative number
129	9d	Rent paid-Heat Not Included x .25 =	PIC 9	7		Can't be a negative number
130	14	Homestead Credit	PIC 9	7		Can't be a negative number
131		END OF DATA	PIC X		*EOD* <cr></cr>	

# Wisconsin income tax

# **2005**

Complete form using BLACK INK

For the year Jan. 1-Dec. 31, 2005, or other tax year beginning \_\_\_\_\_\_\_, 2005 ending \_\_\_\_\_\_, 20\_\_\_.

	Your	social security number	Spouse's socia	I security number	7							
		7	8	I I								
or prir		legal last name 9  point return, spouse's legal last	t name	Legal first name Spouse's legal fi	10		dle initial		on Campaign Your spouse			
Place label here	Home	e address (number and street	13					Checkin refund.	g the box			e your tax or
Place I	City	or post office	,	Sta	ite 15	Zip code 16			roper box			ity, village, or
	Fil	ing status Check ✓ b	OOX					of 2005		nty in wn	ich you live	ed at the end
	17								24 City	25	Village	26 Town
ı.u	18	Married filing joint retu	urn	Fill in spous	eo'e fu	ll name	here 🔻	Fill in name	<b>-</b>	27		
g retu	19	Married filing separate Fill in spouse's SSN a				II Haine	niere v		of	28		
semblin	20	Head of household (se Also, check here if ma		21				School o	district f	Fill in you mber (see	ır e page 38)_	29
before assembling return	1	Federal adjusted gros									30	<u>.00</u>
		W-2 wages included	d in line 1				. •	<u>ا ا</u>	<u>.00</u>			
e 27	2	State and municipal in	nterest (see	e page 7)						2		<u>.00</u>
pag	3	Capital gain/loss addit	tion (see p	age 7)						3	32	<u>.00</u>
See	4	Other additions (fill in a 34	code numbe	r and amount,	see pa	nge 7)	33		Total	<b>4</b>		<u>.00</u>
	5	Add the amounts in th	e riaht colu	umn for lines	1 thro	uah 4 .					38	<b>.</b> 00
		State tax refund (Form										
	7	United States governm	ment intere	st			7		<b>.</b> 00			
	8	Unemployment compe	ensation (s	ee page 9) .			8		<b>.</b> 00			
	9	Social security adjustr	ment (see ¡	page 9)			9		<b>.</b> 00			
	10	Capital gain/loss subtr	raction (se	e page 10) .			10	39	<b>.</b> 00			
ere	11	Other subtractions (fill 40	in code num	nber and amour	nt, see     	page 10)						
it he		43 4	14		7	Total 🕨	11		<b>.</b> 00			
payment here	12	Add lines 6 through 1	1							12	45	<u>.00</u>
pay	13	Subtract line 12 from	line 5. This	s is your Wisc	onsin	income				13	46	<u>.00</u>



I-010

Form 1 (2005) Page **2 of 4** 

	Wisconsin income from line 13			<u>.00</u>
15	Standard deduction. See table on page 30, <b>OR</b> If someone else can claim you (or your spouse) as a dependent, see page 17 and check box   48	54	<del>.</del> 7	<u>.00</u>
		_	49	00
16	Subtract line 15 from line 14. If line 15 is larger than line 14, fill in 0	·	<b>50</b>	<u>.00</u>
17	Deduction for exemptions (from line 6 of Exemption Worksheet on page 17)	7a	50	<u>.00</u>
	<ul> <li>b Fill in number of dependents (do not count yourself or your spouse)</li> <li>c If you (or your spouse if filing joint) were age 65 or over,</li> </ul>			
	check appropriate box(es)			
	Subtract line 17a from line 16. If line 17a is larger than line 16, fill in 0.  This is your taxable income		54	<b>.</b> 00
19	Tax (see table on page 31)	9	55	<u>.00</u>
20	Itemized deduction credit. Attach Schedule 1, page 4 20 56			
21	Armed forces member credit (must be stationed outside U.S. See page 18) 2100			
22	School property tax credit			
	a Rent paid in 2005–heat included 58 Find credit from			
	Rent paid in 2005–heat not included59			
	<b>b</b> Property taxes paid on home in 2005 61 50 Find credit from table page 20 22b 62 00			
23	Working families tax credit } If line 14 is less than \$10,000 (\$19,000 if married filling joint), see page 20 23			
	Add credits on lines 20 through 23	46	4	<b>.</b> 00
25	Subtract line 24 from line 19. If line 24 is larger than line 19, fill in 0	56	5	<u>.00</u>
26	Alternative minimum tax. Attach Schedule MT	66	6	<u>.00</u>
27	Add lines 25 and 26	76	7	<u>.00</u>
28	Married couple credit. Attach Schedule 2, page 4			
29	Other credits:			
	b Schedule DI			
	d Schedule VC (Part II)			
30	Add lines 28 and 29	07	74	<u>.00</u>
31	· ·		75	
	This is your net tax	'	76	<u>.00</u>
	Recycling surcharge. Attach Schedule RS		77	<u>.00</u>
	Sales and use tax due on out-of-state purchases (see page 22)	ა	70	<u>.00</u>
	Endangered resources donation (decreases refund or increases amount owed) 34	<b>-</b>		<u>.00</u>
	Packers football stadium donation (decreases refund or increases amount owed)	J		<u>.00</u>
	Breast cancer research donation (decreases refund or increases amount owed)	o	80	<u>.00</u>
37	Veterans trust fund donation (decreases refund or increases amount owed)	7	81	<u>.00</u>
38	Penalties on IRAs, other retirement plans, MSAs, etc. (see page 23)	8	83	<u>.00</u>
30	Add lines 21 through 29		84	00



Form 1 (2005)	Page <b>3 of</b>
Name (a) about an East 4	Verna e e i e l'e e e conite a comple e e

Nam	ne(s) shown on Form 1			Your social seco	urity number	
				1 1	1	
40	Amount from line 39			40		<b>.</b> 00
41	Wisconsin tax withheld. Attach withholding statements 41	85	.00			
42	2005 estimated tax payments and amount applied from 2004 return	86	.00			
43	Earned income credit. Qualifying children ▶ 87 Federal					
	credit	89	<b>.</b> 00			
44	Farmland preservation credit. Attach Schedule FC 44	90	<b>.</b> 00			
45	Net income tax paid to another state (see page 24) 91 45	92	<b>.</b> 00			
46	Homestead credit. Attach Schedule H or H-EZ 46	93	<b>.</b> 00			
47	Farmland tax relief credit. Property taxes					
	on farmland	95	<b>.</b> 00			
48	Eligible veterans and surviving spouses property tax credit 48	96	<b>.</b> 00			
49	Add lines 41 through 48			49	97	<u>.00</u>
50	If line 49 is larger than line 40, subtract line 40 from line 49. This is the <b>AMOUNT YOU OVERPAID</b>			50	98	<u>.00</u> 99
51	Amount of line 50 you want <b>REFUNDED TO YOU</b>			51	100	<u>.00</u> 10
52	Amount of line 50 you want  APPLIED TO YOUR 2006 ESTIMATED TAX	102	.00	103		
53	If line 49 is smaller than line 40, subtract line 49 from line 40. This is the <b>AMOUNT YOU OWE</b> . Paper clip payment to front of return	ie		53	104	<u>.00</u> 10
54	Underpayment interest. Also include on line 53	106	<b>.</b> 00	107		
-010a						

Attach (paper clip) copies of your federal income tax return and schedules.

Assemble your return (pages 1-4) and withholding statements in the order listed on page 27.

#### Sign here

Under penalties of law, I declare that this return and all attachments are true, correct, and complete to the best of my knowledge and belief.

Your signature Spouse's signature (if filing jointly, BOTH must sign) Date Daytime phone

(

Mail your return to:	Wisconsin Department of Revenue	For De	partme	ent Use	Only						
If tax due	PO Box 268, Madison WI 53790-0001	R	М	Υ	Т	MAN	D	Α	Р	С	
If refund or no tax due	PO Box 59, Madison WI 53785-0001			ΟE							
If homestead credit claimed	d PO Box 34, Madison WI 53786-0001			05							





Submit this page with Form 1 if you claim either credit.

Form 1 (2005) Page **4 of 4** 

S	chedule 1 – Itemized Deduction Credit (see page 17)		
1	Medical and dental expenses from line 4, federal Schedule A. See instructions for		108
	exceptions	. 1	100
2	Interest paid from line 14, federal Schedule A. Do not include interest paid on a second home located outside Wisconsin or on a residence which is a boat. Also, do not include interest paid to purchase or hold U.S. government securities	. 2	109
3	Gifts to charity from line 18, federal Schedule A. See instructions for exceptions	. 3	110
4	Add lines 1 through 3	. 4	111
5	Fill in your standard deduction from line 15 on page 2 of Form 1	. 5	
6	Subtract line 5 from line 4. If line 5 is more than line 4, fill in 0	. 6	
7	Rate of credit is .05 (5%)	. 7	x .05
8	Multiply line 6 by line 7. Fill in here and on line 20 on page 2 of Form 1	. 8	<u> </u>
	chedule 2 – Married Couple Credit When Both Spouses Are Employed (hen completing this schedule, be sure to fill in your income in column (A) and your spouse's in		
	(A) YOURSELF	(	(B) SPOUSE
1	Taxable wages, salaries, tips, and other employee compensation. Do NOT include deferred compensation, interest, dividends, pensions, unemployment compensation, or other unearned income		113
2	Net profit or (loss) from self-employment from federal Schedules C, C-EZ, and F (Form 1040), Schedule K-1 (Form 1065), and any other taxable self-employment or earned income		115
3	Combine lines 1 and 2. This is earned income 3		
4	Add amounts from your federal Form 1040, lines 24, 28, and 32, plus repayment of supplemental unemployment benefits, and contributions to secs. 403(b) and 501(c)(18) pension plans included in line 36, and any Wisconsin disability income exclusion. Fill in the total of these adjustments that apply to your or your spouse's income 4		117
_	,		<u> </u>
5	Subtract line 4 from line 3. This is qualified earned income. If less than zero, fill in 0		
6	Compare the amounts in columns (A) and (B) of line 5.  Fill in the smaller amount here. If more than \$16,000, fill in \$16,000 6		_
7	Rate of credit is .03 (3%)	x .0	
8	Multiply line 6 by line 7. Fill in here and on line 28 on page 2 of Form 1 8		Do not fill in more than \$480.

Clair	nant's social security number Spouse's	s social security nun	nber	1					
	1 1								
	legal last name	Legal first nam	ne and midd	le initial		Check proper box and fill and the county in which			
Hom City	oint return, spouse's legal last name	Spouse's legal	first name	and middle initial		Fill in name	Villa	age	Town
Hom	e address (number and street)					County of			
City	or post office		State	Zip code		Daytime telephone number			
	a What was your age as of Decembe	r 31 20052 (If vo	u were und	ler 18, vou do not aux	alify for h	nomestead credit for 2005.)	1 a	Fill in age	119
	<b>b</b> If you are married and your spouse				-			i iii iii ago r	
2	Were you a legal resident of Wisco	J						Yes	∃ No
3	Were you claimed or will you be cla		-						J
	(If "Yes" and you were under age 6	2 on December :	31, 2005,	you do not qualify.	)		. 3	Yes	No
Но	usehold Income			-					
4	Wisconsin income from line 12	2 of Form 1A	or line 13	3 of Form 1 (see	instru	ictions)	. 4 _		<b>.</b> 00
5 6	If not filing a 2005 Wisconsin								
	<b>a</b> Wages +								<b>.</b> 00
,	<b>b</b> Other taxable income (list type						_ 5 b _		<b>.</b> 00
. 6	Nontaxable income not inc						0 -	121	00
•	a Unemployment compensation							122	<u>.00</u>
	<b>b</b> Social security, federal and s								<u>.00</u>
	c Railroad retirement benefits.						<u>.00</u>		
	<ul><li>d Pensions, annuities, and oth</li><li>e Contributions to deferred cor</li></ul>		-						<u>.00</u>
	f Contributions to IRA and SIM		•	-	•	•			<u>.00</u>
	g Interest on United States bor	•							•00
	<b>h</b> Child support, maintenance p			•			•		•00
	i Wisconsin Works (W2) payme	-				•			•00
	a Add lines 4 through 6i								•00
	<b>b</b> Fill in number of qualifying de								•00
	c Household income. Subtract li	•		•	•	· · ——		124	•00
_			` `	e instructions f		<u> </u>			
8	Homeowners – Net <b>2005</b> prop	•					. 8	125	<b>.</b> 00
9	Renters—Rent from your rent								
Ū	Heat included (13b of rent cer			400		$_{\bullet}00 \times .20 (20\%) = .$	9 b	127	<b>.</b> 00
	Heat not included (13b of rent		-	400		<u>.00</u> x .25 (25%) = .	9 d	129	.00
10	Add lines 8, 9b, and 9d (or en		,				10		•00
	edit Computation	tor amount no	111 11110 0	or raxoo, reality	toddot	ion conducto,			
11	Fill in the <b>smaller</b> of the amou	int on line 10 o	or \$1,450	0			11 _		<b>.</b> 00
12	Using the amount on line 7c, f								•00
13	Subtract line 12 from line 11 (i		-			•			•00
14	Homestead credit – Using the					•		130	•00
	er penalties of law, I declare this home							knowledge and	
Sig	Claimant's signature, date					ise's signature	<u>, , .</u>		
	e								

PO Box 34 Madison, WI 53786-0001



For De	partme	nt Use (	)nly			
R	YR	Т	D	Α	С	
	05					

# Wisconsin income tax

Complete form using **BLACK INK** 

For the year Jan. 1-Dec. 31, 2005, or other tax year beginning \_\_\_ ending \_\_\_\_\_\_, 20\_\_\_.

	Your	social security number	Spouse's socia	al security num	ber							
	12	23   45   6787	987   6	5 4323								
print		legal last name ROGERS		Legal first na		middle initial		State election		gn fund State Election	Camr	naign
ere or		oint return, spouse's legal la EVANS	dle initial	Fund, check box(es). X You Your spou								
label here or print		e address (number and stree 12 HAPPY TRAIL			<b>/</b>			Checking the refund.		vill not change	our t	ax or
Place I	City	or post office MADISON			State <b>WI</b>	Zip code 537	04	Tax district Check prope	r box and fil	l in name of city	. villad	ae. or
	Fil	ing status Check ✓	box	'		1				which you lived		
i		Single						01 2003.	City	Village	X To	own
	X	Married filing joint re	turn					Fill in name ▶	MADI	SON		
returr		Married filing separa Fill in spouse's SSN		Fill in spo	ouse's	full name	here $\blacktriangledown$	County of	DANI			
assembling return		Head of household (s Also, check here if m	see page 6).	<b>—</b>				Sobool dist	riot Fillin	our see page 38)	3269	<del></del>
re ass	1	Federal adjusted gro	ss income (	see page 7	7)				1	1800	0	<b>.</b> 00
before		W-2 wages include										
27 b	2	State and municipal i										.00
ge		Capital gain/loss add										.00
See page		Other additions (fill in							🗷 _			100
Se	7		06 1500					To	otal 🕨 4 _			<b>.</b> 00
	5	Add the amounts in t	he right col	umn for line	es 1 th	rough 4 .			5	330	000	.00
	6	State tax refund (For	m 1040, lin	e 10)			6		<u>.00</u>			
.	7	United States govern	nment intere	st			7		<u>.00</u>			
	8	Unemployment comp	ensation (s	ee page 9)			8		<b>.</b> 00			
	9	Social security adjust	tment (see	page 9)			9		<u>.00</u>			
<u> </u>		Capital gain/loss sub							<u>.00</u>			
¦	11	Other subtractions (fi	II in code nun	nber and amo	ount, se	e page 10)						
é												
t he						Total	11		<b>.</b> 00			
nen	12	Add lines 6 through 1										.00
oayn		Subtract line 12 from								330	000	.00
JP J	. •	2.23.33	31 1111	, 5	. 5 5 5 1 1 5 1							
R CI												
PAPER CLIP payment here												
9												



Form 1 (2005) Page **2 of 4** 

14	Wisconsin income from line 13	14	33000 _00
15	Standard deduction. See table on page 30, <b>OR</b> ▼	_	11037 _00
	If someone else can claim you (or your spouse) as a dependent, see page 17 and check box		04000
16	Subtract line 15 from line 14. If line 15 is larger than line 14, fill in 0	16	21963 .00
17	Deduction for exemptions (from line 6 of Exemption Worksheet on page 17)		<u>.00</u>
	<b>b</b> Fill in number of dependents (do not count yourself or your spouse)		
	c If you (or your spouse if filing joint) were age 65 or over, check appropriate box(es) You Spouse		
18	Subtract line 17a from line 16. If line 17a is larger than line 16, fill in 0.		21963 00
	This is your taxable income	18	•00
			1172 .00
20	Itemized deduction credit. Attach Schedule 1, page 4 2000		
21	Armed forces member credit (must be stationed outside U.S. See page 18) 2100		
22	School property tax credit		
	a Rent paid in 2005–heat included		
	Rent paid in 2005–heat not included ftable page 19 <b>22a.</b> 00		
	<b>b</b> Property taxes paid on home in 2005 Find credit from table page 20 <b>22b .</b> 00		
23	Working families tax credit } If line 14 is less than \$10,000 (\$19,000 if married filing joint), see page 20 23		
24	Add credits on lines 20 through 23	24	<b>.</b> 00
25	Subtract line 24 from line 19. If line 24 is larger than line 19, fill in 0	25	1172 <u>.00</u>
26	Alternative minimum tax. Attach Schedule MT	26	<b>.</b> 00
27	Add lines 25 and 26	27	1172 <u>.00</u>
28	Married couple credit. Attach Schedule 2, page 4		
29	Other credits:		
	b Schedule DI00 c Schedule VC (Part I)00		
	d Schedule VC (Part II)00		
30	Add lines 28 and 29	30	1172 <u>.00</u>
31	Subtract line 30 from line 27. If line 30 is larger than line 27, fill in 0.  This is your net tax	31	1172 _00
32	Recycling surcharge. Attach Schedule RS		
	Sales and use tax due on out-of-state purchases (see page 22)		
34	Endangered resources donation (decreases refund or increases amount owed)		
35	Packers football stadium donation (decreases refund or increases amount owed)		
36	Breast cancer research donation (decreases refund or increases amount owed)		<u> </u>
	Veterans trust fund donation (decreases refund or increases amount owed)		
	Penalties on IRAs, other retirement	J	100
	plans, MSAs, etc. (see page 23)	38	
39	Add lines 31 through 38	39	1172 <u>.00</u>



Nam	e(s) shown on Form 1	Your social security	number I	
40	Amount from line 39	40	1172	.00
41	Wisconsin tax withheld. Attach withholding statements 41 72300			
42	2005 estimated tax payments and amount applied from 2004 return			
43	Earned income credit. Qualifying children <b>\rightarrow</b> Federal			
	credit% =			
44	Farmland preservation credit. Attach Schedule FC			
45	Net income tax paid to another state (see page 24) 45			
46	Homestead credit. Attach Schedule H or H-EZ 46 91600			
47	Farmland tax relief credit. Property taxes			
	on farmland			
48	Eligible veterans and surviving spouses property tax credit 48			
49	Add lines 41 through 48	49	1639	.00
50	If line 49 is larger than line 40, subtract line 40 from line 49.  This is the <b>AMOUNT YOU OVERPAID</b>	50	467	<b>.</b> 00
51	Amount of line 50 you want <b>REFUNDED TO YOU</b>	51	467	<b>.</b> 00
52	Amount of line 50 you want  APPLIED TO YOUR 2006 ESTIMATED TAX			
53	If line 49 is smaller than line 40, subtract line 49 from line 40. This is the <b>AMOUNT YOU OWE</b> . Paper clip payment to front of return	53		.00
54	Underpayment interest. Also include on line 53			
I-010a				

Attach (paper clip) copies of your federal income tax return and schedules. Assemble your return (pages 1-4) and withholding statements in the order listed on page 27.

#### Sign here

Under penalties of law, I declare that this return and all attachments are true, correct, and complete to the best of my knowledge and belief. Your signature Spouse's signature (if filing jointly, BOTH must sign) Daytime phone

Mail your return to: Wisconsin Department of Revenue If tax due ...... PO Box 268, Madison WI 53790-0001 If refund or no tax due...... PO Box 59, Madison WI 53785-0001 If homestead credit claimed ... PO Box 34, Madison WI 53786-0001

For Department Use Only 05





Submit this page with Form 1 if you claim either credit.

Form 1 (2005) Page **4 of 4** 

S	chedule 1 – Itemized Deduction Credit (see page 17)
1	Medical and dental expenses from line 4, federal Schedule A. See instructions for exceptions
2	Interest paid from line 14, federal Schedule A. Do not include interest paid on a second home located outside Wisconsin or on a residence which is a boat. Also, do not include interest paid to purchase or hold U.S. government securities
3	Gifts to charity from line 18, federal Schedule A. See instructions for exceptions
4	Add lines 1 through 3
5	Fill in your standard deduction from line 15 on page 2 of Form 1
6	Subtract line 5 from line 4. If line 5 is more than line 4, fill in 0
7	Rate of credit is .05 (5%)
8	Multiply line 6 by line 7. Fill in here and on line 20 on page 2 of Form 1
	chedule 2 – Married Couple Credit When Both Spouses Are Employed (see page 21) nen completing this schedule, be sure to fill in your income in column (A) and your spouse's income in column (B)
	(A) YOURSELF (B) SPOUSE
1	Taxable wages, salaries, tips, and other employee compensation. Do NOT include deferred compensation, interest, dividends, pensions, unemployment compensation, or other unearned income
2	Net profit or (loss) from self-employment from federal Schedules C, C-EZ, and F (Form 1040), Schedule K-1 (Form 1065), and any other taxable self-employment or earned income
3	Combine lines 1 and 2. This is earned income
4	Add amounts from your federal Form 1040, lines 24, 28, and 32, plus repayment of supplemental unemployment benefits, and contributions to secs. 403(b) and 501(c)(18) pension plans included in line 36, and any Wisconsin disability income exclusion. Fill in the total of these adjustments that apply to your or your spouse's income 4
5	Subtract line 4 from line 3. This is qualified earned income. If less than zero, fill in 0
6	Compare the amounts in columns (A) and (B) of line 5.  Fill in the smaller amount here. If more than \$16,000, fill in \$16,000 6
7	Rate of credit is .03 (3%)
8	Multiply line 6 by line 7. Fill in here and on line 28 on page 2 of Form 1 8 more than \$480.

	Chec	LEZ Wisconsing homesteat k box if an amended return	n 🕨 🗌	20	005		
		ant's social security number 23   45   6787		ial security nu			
print	Your le	egal last name ROGERS		Legal first na	me and midd		Check prope and the cour
re or	If a joi	nt return, spouse's legal last name	;	1 .	al first name	and middle initial	Fill in .
l he	Home	address (number and street)			\LL		name _
abe							County of _
Place label here	City or	post office			State	Zip code	Daytime telepho
	2 3	If you are married and your Were you a legal resident of Were you claimed or will you (If "Yes" and you were under	of Wisconsir	n from 1-1-0 ed as a depe	5 through and endent on s	12-31-05? (If "No, someone else's 20	" you do not qualify.) 05 federal income tax
	Hou	sehold Income					
tax bill	4 5 a	Wisconsin income from If <b>not filing</b> a 2005 Wis Wages	sconsin re	turn, fill in	Wiscons	in <b>taxable</b> incon	•
erty	b	Other taxable income (					
or prope	b	Nontaxable income in Unemployment compe Social security, federa	ensation . I and state	 e SSI, SS	 I-E, SSD	, and caretaker	r supplement payn
rent certificate or property tax bill	c Railroad retirement benefits						
H	_	Child support, mainter				•	

	k box if an amended retur		2	2005							
	ant's social security number	Spouse's so		.,	7						
	23   45   6787	987		∤4323							
	egal last name		"	irst name and mid	dle initial		eck proper box and f				
	ROGERS			ROY B			d the county in whic	h you live	d at the e		
lf a joi	nt return, spouse's legal last name	e	Spouse	e's legal first name	and middle initia		ill in City	Vil	lage	Town	1
Home	EVANS address (number and street)			DALE		'n					
ionie	address (Hulliber and Street)					Co	unty of				
City o	post office			State	Zip code		time telephone number				=
1 -	\\/\/\	) 0:	2005	0.46	1 10 1	115.5	lu ( 0005)		E111.1	ne ▶ 79	=
	What was your age as of D									,	_
_	If you are married and your		_								<u> </u>
2	Were you a legal resident of			J		3		Z	Yes	S No	
3	Were you claimed or will yo (If "Yes" and you were undo	er age 62 oi	eu as a 1 Dece	mber 31, 2005.	vou do not au	s 2005 rederai i ialify.)	ncome tax return?	3	Yes	s $\square$ No	
Hou	sehold Income				7	- ,,					-
4	Wisconsin income from	n line 12 o	f Form	1A or line 1	3 of Form 1	(see instruction	ons)	4		.0	C
5	If <b>not filing</b> a 2005 Wis						,	-			_
	•						<u>.00</u> =	5 a		.0	C
	Other taxable income (										
6	Nontaxable income n										_
а	Unemployment compe	ensation .						6 a	1	0.008	C
b	Social security, federa	l and stat	e SSI	, SSI-E, SSI	), and caret	aker supplem	ent payments	6 b		.0	C
С	Railroad retirement be	enefits						6 c		.0	C
d	Pensions, annuities, a	nd other	retirer	ment plan di	stributions .			6 d		.0	C
е	Contributions to defer	red compe	ensati	on plans (se	e box 12 of	wage statem	ents)	6 e <u>-</u>		.0	C
f	Contributions to IRA a	ind SIMPL	E pla	ns				6f		.0	C
g	Interest on United Sta	tes bonds	and r	notes and st	ate and mui	nicipal bonds		6 g <sub>-</sub>		.0	C
h	Child support, mainter	nance pay	ments	s, and other	support mo	ney (court ord	dered)	<b>6</b> h <sub>-</sub>		.0	C
i	Wisconsin Works (W2)	payments	s, cour	nty relief, kin	ship care, ar	nd other cash	public assistance	6 i		.0	
7 a	Add lines 4 through 6i							7a	1	0. 0008	C
b	Fill in number of qualify	ing deper	dents	(do not cour	nt yourself o	your spouse)	× \$25	0 = <b>7 b</b> _		.0	C
С	Household income. Sul	btract line	7b fro	m line 7a (if	\$24,500 or ı	more, no credi	t is allowed)	7 c		.0	C
Tax	es and/or Rent Befor	e complet	ing th	is section, s	ee instructio	ns for STEP	4.				_
8	Homeowners - Net 200	<b>05</b> propert	y taxe	s on your ho	mestead, wh	ether paid or	not	8		2600 .0	C
9	Renters-Rent from yo	ur rent cei	tificate	e(s), line 13a	(or Shared	Living Expens	ses Schedule).				
	Heat included (13b of r	ent certific	ate is	"Yes")	. 9a ▶	.00	<u>)</u> x .20 (20%) =	. 9 b		.0	C
	Heat not included (13b	of rent ce	rtificat	te is "No")	. 9c 🕨	.00	<u>)</u> x .25 (25%) =	. 9 d		.0	C
10	Add lines 8, 9b, and 9d	d (or enter	amou	nt from line 6	of Taxes/R	ent Reduction	Schedule)	10 _		2600 .0	C
Cre	dit Computation									4.450	_
11	Fill in the smaller of the	e amount	on line	e 10 or \$1,45	0			11 .		1450 .0	
12	Using the amount on lin	ne 7c, fill i	n the a	appropriate a	mount from	Table A (pag	e 13)	12		0.0	
13	Subtract line 12 from lin	ne 11 ( <b>if li</b>	ne 12	is more tha	n line 11, fil	I in 0; no cred	it is allowable)	13		1450 .0	
14	Homestead credit – Usi	ing the am	ount o	on line 13, fill	in the credi	from Table B	(page 14)	14		916 .0	C

Under penalties of law, I declare this homestead credit claim and all attachments are true, correct, and complete to the best of my knowledge and belief. Claimant's signature, date Spouse's signature

Sign Here

12

13

I-015

Mail to:

Wisconsin Department of Revenue PO Box 34 Madison, WI 53786-0001



For De	partme	nt Use C	Only			
R	YR	Т	D	Α	С	
	05					